

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003184

FILED
Feb 21, 2008
Secretary of State

Entity Name: CHILDREN OF MARY MOTHER OF THE DIVINE MERCY, INC.

Current Principal Place of Business:

14540 SW 38 ST
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

14540 SW 38 ST
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 61-1469481 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAZELAIS, ALBERTE S
14540 SW 38 ST
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BAZELAIS, ALBERTE S
Address: 14540 SW 38 ST
City-St-Zip: MIRAMAR, FL 33027

Title: DV () Delete
Name: LATURE DUMAS, MARIE-NOELLE
Address: 4895 SW 63 RD
City-St-Zip: MIAMI, FL 33193

Title: DV () Delete
Name: EUGENE, GINA
Address: 7825 VENETIAN ST
City-St-Zip: MIRAMAR, FL 33023

Title: DS () Delete
Name: DOMINIQUE, MARGARETTE
Address: 1 RUE RIGAUD
City-St-Zip: PETION-VILLE, HAITI, OC

Title: DS () Delete
Name: DESNOYERS, VIVIANNE
Address: ROUTE DES FRERES
City-St-Zip: VIVY MITCHELL #3, P.V. HAITI, OC

Title: DT () Delete
Name: TOVAR, MARCIA
Address: 2091 CORSICA WAY
City-St-Zip: MARIETTA, GA 30008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTE BAZELAIS

DP

02/21/2008

Electronic Signature of Signing Officer or Director

_____ Date